

APPLICATION FOR DIRECTION Alcohol Interlock

Section 50AAAC Road Safety Act 1986

					Court Reference:	
						(Registrar to complete)
Applicant	: <u></u>					_
Date of Birth:				Licence	Permit Number:	
Address:						
Email:					Phone:	
On		VicR	oads made a	a determination not to r	emove an alcohol int	terlock condition from my driver
licence or	learner p	ermit due to a f	failed attemp	t(s) to start a motor vel	nicle due to the detec	ction of alcohol.
DETAILS	OF FAIL	ED ALCOHOL	INTERLOC	K ATTEMPT(S) SUBJ	ECT TO THIS APPL	ICATION
Number	Date		Time			
1.				* am / pm		
2.				* am / pm		
3.			<u> </u>	* am / pm		
4.				* am / pm		
5.				* am / pm		
GROUNDS FOR MAKING THIS APPLICATION						
ATTACH	ED DOCL	IMENT(S) / INF	ORMATION	I (required to be attach	ed to the application)
Copy of written notice from VicRoads regarding decision not to remove alcohol interlock condition						
Data obtained from the alcohol interlock relating to the failed attempt(s) that provides evidence (whether photographic or otherwise) as to the identity of the person who made the attempt (i.e. 'Interlock Removal Report' and any supporting documentation)						
Date:			_			
					(Signed) Applicant	
LISTING	OF APF	LICATION (re	egistrar to co	omplete)		
This application is listed for hearing before the Magistrates' Court at						
at		* am / pm	on (date)			
		-		(Date must be at least 28 o	lays in advance)	
Date:						
			-		Registrar of the Ma	gistrates' Court

PLEASE NOTE: